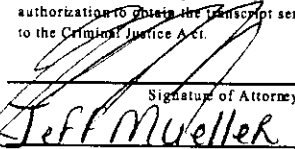
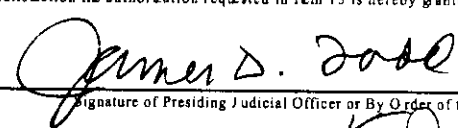


CJA 24 AUTHORIZATION AND VOUCHER FOR PAYMENT OF TRANSCRIPT (Rev. 5/99)

1. CR./DST./DIV. CODE 04-811		2. PERSON REPRESENTED Moore, Billy Wayne		VOUCHER NUMBER	
3. MAG. DKT./DEF. NUMBER		4. DIST. DKT./DEF. NUMBER 04-10050-T		5. APPEALS DKT./DEF. NUMBER	
6. OTHER DKT. NUMBER		7. IN CASE/MATTER OF (Case Name) USA v. Moore		8. PAYMENT CATEGORY <input checked="" type="checkbox"/> Felony <input type="checkbox"/> Misdemeanor <input type="checkbox"/> Appeal	
9. TYPE PERSON REPRESENTED <input checked="" type="checkbox"/> Adult Defendant <input type="checkbox"/> Juvenile Defendant <input type="checkbox"/> Other		10. REPRESENTATION TYPE (See instructions) CC			
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) If more than one offense, list up to five major offenses charged, according to severity of offense. Felon in Possession of Firearm; 18 USC § 922(g)					
REQUEST AND AUTHORIZATION FOR TRANSCRIPT					
12. PROCEEDING IN WHICH TRANSCRIPT IS TO BE USED (Describe briefly) Trial in U.S. District Court					
13. PROCEEDING TO BE TRANSCRIBED (Describe specifically). NOTE: The trial transcripts are not to include prosecution opening statement, defense opening statement, prosecution argument, defense argument, prosecution rebuttal, voir dire or jury instructions, unless specifically authorized by the Court (see Item 14). Trial (Madison Co. Circuit Court, Div. I). Testimony of: DeMoss, Wiser, Mathis and Willis. State of TN v. Moore, Docket No. 04-811					
14. SPECIAL AUTHORIZATIONS					
A. Apportioned _____ % of transcript with (Give case name and _____)					JUDGE'S INITIALS
B. <input checked="" type="checkbox"/> Expedited <input type="checkbox"/> Daily <input type="checkbox"/> Hourly Transcript <input type="checkbox"/> Realtime Unedited Transcript					
C. <input type="checkbox"/> Prosecution Opening Statement <input type="checkbox"/> Prosecution Argument <input type="checkbox"/> Prosecution Rebuttal <input type="checkbox"/> Defense Opening Statement <input type="checkbox"/> Defense Argument <input type="checkbox"/> Voir Dire <input type="checkbox"/> Jury Instructions					
D. In this multi-defendant case, commercial duplication of transcripts will impede the delivery of accelerated transcript services to persons proceeding under the Criminal Justice Act.					
15. ATTORNEY'S STATEMENT As the attorney for the person represented who is managed above, I hereby affirm that the transcript requested is necessary for adequate representation. I, therefore, request authorization to obtain the transcript services at the expense of the United States pursuant to the Criminal Justice Act.  Signature of Attorney Jeff Mueller Printed Name Telephone Number: 731-988-9900 <input checked="" type="checkbox"/> Panel Attorney <input type="checkbox"/> Retained Attorney <input type="checkbox"/> Pro-Se <input type="checkbox"/> Legal Organization Date: 6/13/05			16. COURT ORDER Financial eligibility of the person represented having been established to the Court's satisfaction the authorization requested in Item 15 is hereby granted.  Signature of Presiding Judicial Officer or By Order of the Court Date of Order: 15 June 2005 Number of Pro Tunc Date		
CLAIM FOR SERVICES					
17. COURT REPORTER/TRANSCRIBER STATUS <input type="checkbox"/> Official <input type="checkbox"/> Contract <input type="checkbox"/> Transcriber <input type="checkbox"/> Other			18. PAYEE'S NAME (First Name, M.I., Last Name, including a ny suffix), AND MAILING ADDRESS		
19. SOCIAL SECURITY NUMBER OR EMPLOYER ID NUMBER OF PAYEE			Telephone Number:		
20. TRANSCRIPT	INCLUDE PAGE NUMBERS	NO. OF PAGES	RATE PER PAGE	SUB-TOTAL	LESS AMOUNT APPOINTED
Original					
Copy					
Expense (Itemize)					
TOTAL AMOUNT CLAIMED:					
21. CLAIMANT'S CERTIFICATION OF SERVICE PROVIDED I hereby certify that the above claim is for services rendered and is correct, and that I have not sought or received payment (compensation or anything of value) from any other source for these services. Signature of _____ Date _____					
ATTORNEY CERTIFICATION					
22. CERTIFICATION OF ATTORNEY OR CLERK I hereby certify that the services were rendered and that the transcript was received. Signature of Attorney or Clerk _____ Date _____					
APPROVED FOR PAYMENT — COURT USE ONLY					
23. APPROVED FOR PAYMENT Signature of Judicial Officer or Clerk of Court _____ Date _____					24. AMOUNT APPROVED

FILE COPYC. Amy Mays
Court Reporter

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Notice of Distribution

This notice confirms a copy of the document docketed as number 39 in case 1:04-CR-10050 was distributed by fax, mail, or direct printing on June 15, 2005 to the parties listed.

Jeff Mueller
LAW OFFICES OF JEFF MUELLER
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Jackson, TN 38303

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109 S. Highland Ave.
Ste. 300
Jackson, TN 38301

Honorable James Todd
US DISTRICT COURT